

Let's Talk About Secondhand Smoke

A Gitxsan TRYAMF (Tobacco Reduction for Young Aboriginal Mothers and Families) Community Report for the Hazeltons and Gitxsan Area



2010

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The Gitxsan TRYAMF is a community-based research project that was initiated to learn about second-hand smoke exposure in the Hazeltons and find meaningful solutions to the problem.

Prepared by

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Many people have contributed to this project by sharing their experiences, wisdom and time. We would like to thank the young women, elders and other community members who took the time to participate.

We would also like to thank the Gitx̱san Health Society and the Gitsegukla Health Programs and Services for their assistance and support of this project. The Canadian Institutes for Health Research provided funding for this research, and the First Nations and Inuit Health Branch provided financial support for selected research activities and the development of resources. We would like to acknowledge Vivian Smith for her contributions in the planning and proposal writing stages of this project.

We hope this is the beginning of an ongoing relationship between all parties.

Layout and Design



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Suggested citation:

Bottorff, J. L. et al. (2010). *Let's Talk About Secondhand Smoke: A Gitx̱san TRYAMF (Tobacco Reduction for Young Aboriginal Mothers and Families) Community Report*. Kelowna, BC: UBC Okanagan

*Protecting the health of children and pregnant women involves **all** members of the community. Many of the issues that women and children face also influence the health and well-being of all members of the community.*

Executive Summary

This study grew out of concerns about the secondhand cigarette smoke exposure that women and children experience as they go about their daily lives in the Hazeltons and Gitx̱san area.

This project is a collaboration between the Gitx̱san Health Society and Gitsegukla Health Programs and Services, First Nations and Inuit Health Branch, and the University of British Columbia.

The project goals were:

- To build effective research partnerships between the Gitx̱san and Aboriginal peoples living in the Hazeltons and Gitx̱san area and health researchers from other parts of BC.
- To understand how living in these particular communities impacts the health of its residents, with a particular focus on secondhand cigarette smoke exposure.
- To involve Gitx̱san and other Aboriginal peoples living in the Hazeltons and Gitx̱san area in examining cigarette smoking and its influence on young pregnant and parenting Aboriginal women and their children.
- To work with all members of the Gitx̱san communities to develop action plans to reduce the harmful effects of secondhand smoke exposure on pregnant and parenting Aboriginal women and their children.

Secondhand smoke and smoking were found to be influenced by complex factors.

Highlights of the findings include:

- Exposure to secondhand smoke occurs in three main locations: 1) community settings, 2) homes and 3) vehicles. Community settings where women, children and others are exposed to secondhand smoke include halls where recreational activities and sporting events are held.
- Many people are concerned about the effects of smoking and secondhand smoke on the health and well-being of children, women and elders.
- Some families have created no-smoking rules in their homes; however, the housing shortage in the Hazeltons and Gitx̱san area means that many women

live in situations where they do not have the authority to make or enforce no-smoking rules in their living space.

- Some women depend on family members and friends who smoke to provide childcare and as a result their children are exposed to secondhand smoke.
- Some communities and individual leaders have taken steps to ensure community gatherings are smoke-free. For example, most feasts, some bingos and some community gatherings and weddings are smoke-free; however, dependence on revenues from smoking bingos and the sale of cigarettes as well as high smoking rates have created resistance to extending smoking bans to all events.
- Unemployment, stress and trauma all contribute to smoking rates among both women and men. Some people in the community have quit smoking to be better role models for their children and grandchildren.
- Smoking is often associated with people's sense of belonging and their relationship with others.
- Community members are interested in developing strategies to reduce smoking and secondhand smoke, and enhance life in the Hazelton and Gitxan area. Women with young children have ideas that would reduce their isolation and stress, and many elders are interested in lending their support to reducing tobacco use.
- Community discussions involving everyone are needed to develop strategies to establish smoke-free spaces and to support efforts to reduce smoking and secondhand smoke.



Project Methods: What was Done?

Individual Interviews with Community Workers

Fifteen community workers from the Hazeltons and Gitx̱san area were interviewed, including people who worked for their communities in health, education, family and childcare or community development. Some were band representatives and/or elders.

Group Interviews

Eight small groups of women aged 16-30 were formed to conduct group interviews. These groups were invited to participate in discussions along the following themes:

- 1) What was life like in the Hazeltons and Gitx̱san area for young women and their children?
- 2) How was tobacco use and secondhand smoke exposure part of everyday life?
- 3) What would they like to see changed in their lives and in their communities in general and regarding exposure to secondhand smoke in particular?

Group interviews were also held with youth (2), elders (2), men (1) and a women's group (1). In total, the groups included more than 65 participants. Each of these groups was asked to share their experiences and ideas about secondhand smoke exposure and what they would like to see happen in their community.

The majority of participants identified as Gitx̱san or Wet'suwet'en and lived in Kispiox, Glen Vowell, Gitsegukla, Hagwilget, Gitanmaax and Kitwanga. A few participants lived in Two Mile, New Hazelton, Old Hazelton and South Hazelton.

Community Surveys

There were two community surveys conducted at community events to gather people's opinions and attitudes on secondhand smoke exposure. The first survey was completed by 207 people; 247 completed the second survey.

Study Participants

	Female	Male	Total # of Participants
Interview Participants			
Young Women	26	—	26
Community Workers	13	2	15
Elders	8	1	9
Youth	3	3	6
Men	—	3	3
Women's Group	7	—	7
Subtotal:	57	9	66
Survey Participants	289	154	454*
Total:	346	163	520*

*Missing data on gender in 11 surveys.

Community Meetings

After preliminary analysis of the data, the team held a series of community events in the Hazeltons and Gitx̱san area in May 2008 to share general themes and get feedback from the community on the study findings. At this time, the Street Spirits Theatre Company from Prince George, BC was hired to develop a DVD based on the ideas presented at the meetings and the findings of this project.



The Street Spirits Theatre Company, whose logo is left, is a youth-driven social action theatre company. For more info, visit www.streetspirits.com.

Smoking in the Hazeltons and Gitx̱san area

Smoking rates in the Hazeltons and Gitx̱san area are higher than the provincial and national average. The latest reports indicate that the smoking rate among those who self-identify as Aboriginal is 35%. This compares to 16% among the general population (BC Stats, 2007).

Smoking among the Aboriginal population is a major contributing factor to mortality among the Aboriginal population (Kahn & Wardman, 2004).

Secondhand smoke occurs in homes, cars, community halls, workplaces and even outside if people are near a lit cigarette.

“Everybody Smokes”

Smoking is common in the Hazeltons and Gitx̱san area and often present in social and family situations, making secondhand smoke exposure part of day-to-day life even for

non-smokers. Smoking often begins early when there is easy access to cigarettes.

FACT:

Many people find their first experience with tobacco unpleasant. Initially, social pressure may cause addiction to develop. Once addicted, there are fewer external pressures to quit than there are with other addictions. Smokers are not in immediate danger of losing their jobs or families due to their addictions. More dangerous health effects are not as obvious in the beginning.¹

People told many stories about how they began smoking with friends or cousins as children. While some took cigarettes without their parents' permission, others were given cigarettes by well-meaning relatives.



Smoking and socializing

"Now it's down to one or two cigarettes unless I go out and tag along with (name) when he's drinking. You just see everybody else smoking and you wanna do it too."

– 27-year-old female

Smoking as acceptable/normal

"Smoking isn't seen as doing something wrong. It's more okay from an adult perspective. People seem to accept smoking and would prefer their kids to smoke over drinking and drugging."

– Health worker

Starting to smoke at a young age

"Kids smoke in elementary school. My nieces, when they were [in] Grade 6 and 7, they stole cigarettes from their mom, and they were smoking."

– Family worker



Exposure to Secondhand Smoke

Smoke Exposure in the Community

There are many places in each community where people are exposed to smoking and secondhand smoke. Sporting events, bingo and home are the places that were repeatedly mentioned as areas of concern.

Sporting Events



"If I'm sitting at the soccer field and I can smell it then I know my kids can smell it and I'm like, 'Can you please move?' I say please, but I'm being rude."

– 25-year-old female

"Cause I think they need to learn that smoking is not part of sports and smoking in sports will not help you at all because it will only just slow you down... Well I'm not scared to speak up. I scream at everybody who's smoking around me and my kid. 'Get out of here! Go smoke somewhere else!'"

– 22-year-old female



Bingo



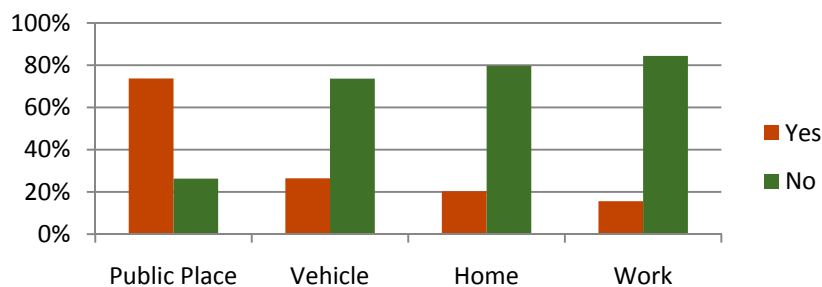
"I've been in up at that hall there and you're just choking because of the smoke, and you can see a haze. That's just really not good. It's not something that I'd want my kids or other people's kids in, and especially those elders that already are starting to have health problems."

– Community developer



Who sets the rules for health standards in community settings?

Exposure to secondhand smoke by location



This graph suggests that the majority of people in the Hazelton and Gitksan area were exposed to secondhand smoke in public places. These places include community halls where bingos and dances are held and sporting events. These are locations where individuals cannot set the rules.



FACT:

"Prolonged and repeated exposure to secondhand smoke means that you, your family and friends are more likely to develop secondhand smoke diseases, some of which are fatal:

- Middle ear infections
- Lung cancer
- Asthma
- Reduced lung function
- Breast cancer
- Croup
- Pneumonia
- Sore throat
- Heart disease
- Bronchitis"²

Home

Climate, mobility issues and high rates of unemployment contributed to women with young children spending most of their time at home. As a result, when women lived with smokers they and their children were frequently exposed to secondhand smoke. Some women who were smokers went outside to smoke when they could. Women often had to remind others to do the same.

“For my home, I would like to change my spouse not to smoke right beside the door outside. You can see all the butts everywhere and all the smoke still comes in and all that chemicals all over his clothing.”
– 27-year-old female

“I’d just ask them to go outside and smoke. Even if it is their own house, you know? ... ‘Cause I’m still smoking and pregnant, I don’t feel I should be telling them what to do, but with my child in the room, I just ask them to leave.”
– 33-year-old female

“I would just tell them straight out, ‘I don’t smoke in front of my kids; you’re not going to smoke in front of my kids.’ I go, ‘It’s your house but smoke outside.’ He [in-law] was really shocked.”
– 28-year-old female

Families and Friends

Maintaining strong relationships with family and friends was important to women. People in women’s social networks had different expectations about smoking. Some families made it a habit to smoke outside. When people smoked inside, women had to speak out about smoking to protect their children from secondhand smoke.

“My Geetz [grandma] smokes in her house, but when we’re there I ask her not to ‘cause the kids are there. She doesn’t mind.”
– 24-year-old female

“My other parents, they smoke in their house, but they know I’ll pack my kids up and leave and they just ... can’t grasp that – the thing where you can’t smoke in front of them.”
– 28-year-old female

Other Factors Contributing to Secondhand Smoke Exposure

Housing

Housing shortages increase women and children’s exposure to secondhand smoke because it means they must live in crowded homes with friends and relatives who might smoke. Although women want to speak up for their children, it is not easy to establish smoking rules when they live in other people’s homes. Other family members could play an influential role in supporting smoke-free spaces.

FACT:

Secondhand smoke hurts everyone, but is especially dangerous to little ones because their lungs are still growing and developing. Because they are smaller, babies and children breathe more quickly and take in more harmful chemicals for their size than adults do. In addition, their immune systems, which protect them from getting sick, are less developed and can't protect them as much from tobacco smoke.³

“I may smoke but I don't smoke around him [son], and I felt uncomfortable asking her not to smoke in her own house.”
– 33-year-old female

“We're stuck in my in-laws' place now. We have no other place to go to. But they don't smoke so much inside anymore. They always stand outside with us when we go outside to smoke now.”

– 27-year-old female

Transportation

Many women described paying for or providing rides to neighbouring communities. Riding or driving in a smoke-free vehicle was negotiated between the driver and the passenger. Sometimes there was little choice but to travel in a vehicle where someone smoked. It was difficult for women to take advantage of resources and smoke-free activities that were available in other communities when transportation was expensive and sporadic. Many wanted more programs centralized in their community.

“You know even when we used to travel with our family trips, my dad would always smoke in the car, but now when he has grandkids in the car he won't even smoke.”

–28-year-old female

“Having more activities that are centralized and having the time to go into the homes of the moms and tots would be easier instead of having them coming out to the program in another community ... unless you're providing transportation.”
– Family worker

“Sometimes some of them don't even smoke in the vehicle.... When my kids are in there they just don't smoke at all. And then they take a stop and have a break to have a cigarette on the side of the road.”

– 28-year-old female

“Having education where you are in your community so you don't have to worry about transportation and, yeah, having everything free like the patch and Nicorette, the counselling for quitting smoking and even, you know – you have support groups for everything else; why not have a support group for that?”

– Educator

FACT:

“Smoking in a closed-in space such as a car greatly increases the concentration of harmful chemicals produced by second-hand smoke. Second-hand smoke contains the same 4,000+ chemicals that are inhaled by a smoker. About 50 of these chemicals are known to cause cancer.”⁴

Relationships

Maintaining a smoke-free life in the Hazeltons and Gitxan area is challenging when people are surrounded by cigarette smoke. Having healthy, respectful relationships with friends and family is key to success to being smoke-free and keeping everyone safe from smoking and second-hand smoke.

“I keep trying to quit, but I just see other people smoking and it’s like ‘\$%*, give me one.’”*

–24-year-old female

“Cause my husband smokes through the day, you know, and when he kisses him [grandson], I can smell it and I tell him. He’s just like, ‘So I have to brush my teeth every time I smoke?’ and I said ‘yup’ and he’s reduced his smoking.”

– Family worker

Childcare

Despite the closeness of extended family, some women found that access to affordable and appropriate childcare was challenging. Women spoke about feeling isolated and stressed. They recognized that smoking was one way they could have a short break while looking after their children.

“I was trying to hire someone to babysit and I’m like, ‘Come on, babysit. I gotta go do something in town. I’ll be back in about an hour, half-an-hour or a hour-and-a-half’ and she’s like, ‘I’m going to bingo soon.’”

– 28-year-old female

“That’s how it is for me, with my four kids. At night time, I just go outside, have a smoke, relax and just think.”

– 32-year-old female

“There’s a lot of guys around this area whose wives are working, and they have to look after the babies. And they’re out there looking after the babies smoking.”

– Elder

Concerns about Smoking and Secondhand Smoke

Many people we spoke with were worried about how smoking and secondhand smoke exposure would affect those around them. They were particularly concerned about children, elders and breathing issues.

Health of Children

“I think it is hard to keep my two younger ones inside when I go outside for a smoke. ... Even if I try [to] lock the door, they know how to open it now so I can’t keep them in the house when I smoke anymore.”
– 27-year-old female

“Having awareness and information sessions on the harm smoking does for people and for families – I mean for your children, especially your children – would help. Because I didn’t even know that when you smoke and you pack your baby, or me packing my grandson, that it seeps into his skin. I didn’t know that. And he’s inhaling all this smoke smell all over me when I come home from bingo.”

– Family worker

Role Modeling

Awareness of the influence that adult actions have on youth was mentioned repeatedly. People felt a strong responsibility about being role models and some people struggled to live up to all that entailed.

“We need to quit ‘cause my kids are gonna be teenagers pretty quick. *sighs* I think we just need to quit so that gives them an idea that it’s not good and we’re thinking of them.”
– 32-year-old female

“Yes, as parents have to realize that we’re being role models to our kids. If we’re gonna smoke, try not to smoke around the kids so that they can make up their own minds. And talk to them about it so that they find out why it’s not good for them.”

– 22-year-old female



Health of Elders

Elders were recognized as key members of the community who were highly valued for their knowledge and leadership roles. Increasing opportunities for youth and elders to connect was repeatedly mentioned as a way to strengthen community and cultural ties between the generations. The health and comfort of elders was often the motivation to make community events smoke-free.

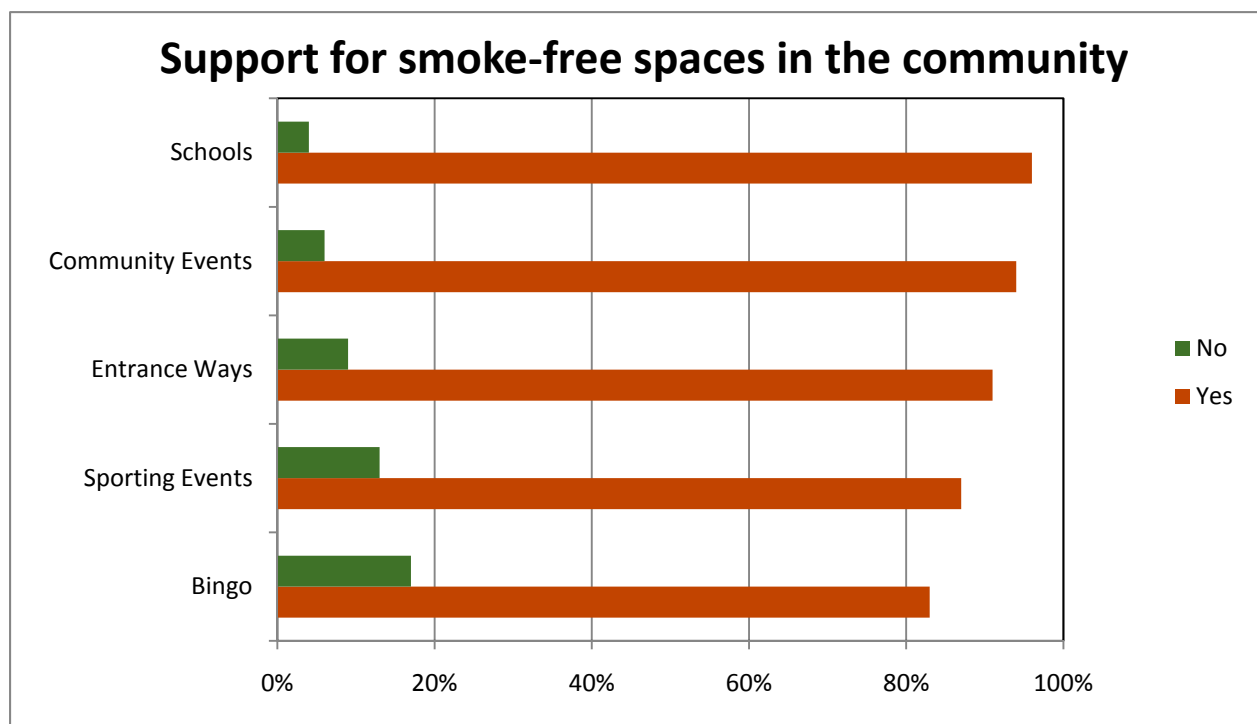
"I said this is going to be a non-smoking feast because there are elders that are here and they enjoy the companionship of everybody. Smoking is a big problem for them because most of our elders are sick."

—Health worker

FACT:

"Neither ventilation nor filtration, even in combination, can reduce tobacco smoke exposure indoors to levels that are considered acceptable. Only 100% smoke-free environments provide effective protection. Contrary to common belief, smoke-free environments are widely supported by both smokers and non-smokers."⁵

This graph shows that a strong majority of the people who completed surveys in either December 2006 or February 2007 believed it was important to provide smoke-free environments in the Hazeltons and Gitx̱san area.



Women's Suggestions for Change

Elders and Community Leaders to be More Involved

Participants want elders and community leaders to become involved in supporting smoke-free spaces. They believe these people must become involved for change to happen.

"And I tell children, I said if an elder or somebody comes and talks to you about some things you're doing, it's more than likely they're giving you a detour in your life, you know. They're saying 'I've been down that road. Don't bother with it. Try something else because you're just wasting time and energy and probably sacrificing your health [and] your youth, especially.'"

—Health worker

"And, I think that having elders and others involved is really important because when our hall went non-smoking, we did have the support of the elders and we did have support of some youth and youth programming coordinators ... so it was a full spectrum."

— Community developer

"I think it has to come up from people who are seen as the power people, right? Well, I mean, it can't just spontaneously come from them probably. They need to have it suggested or good reasons for it to happen maybe."

— Educator

Diversify Fundraising Strategies

Over the years, bingo has provided an important social activity and community fundraiser. Smoking was thought to be a key component of profitable bingos. Communities are now considering other ways to raise funds. For example, one community is pursuing hosting regional Aboriginal sports championships.

Improve Access to Housing

Improved access to housing would reduce dependence on family and friends to provide housing for new families, giving young women more control over their home environments.

Improve Opportunities for Childcare

Improved opportunities for childcare would support young women's involvement in community activities and, for those who wish, employment outside the home. Ideas included having childcare available at community centres, bingos and gyms and organizing babysitting exchanges.

“They could have more stuff for moms to do, for mom’s timeout. Like, have a mom’s night out and like, have an on-site childcare for the gym or something.”
– 17-year-old female

“If there was childcare we could have a stitch ‘n’ bitch night, *laughs* cross-stitching or crafts, like just a crafts night, where you just sit around and talk.”
– 27-year-old female



Stop Tobacco Sales to Minors

“Yeah, I know, I was walking out of the smoke shop once and this one little girl – I don’t know how old she was or who she was – [said] ‘I’ll give you a half a pack of smokes to buy me a pack.’ I was like, ‘Nope. Not old enough’ and kept walking.”
– 32-year-old female

“Like if somebody kept track of sales, say by having everyone sign for smokes, if somebody actually kept track and made sure if they bought cigarettes for kids, then don’t sell it to them anymore.”
– 24-year-old female

Ban the High School Smoking Pit

“Well I think it’s pretty stupid to have a smoking pit for underage smokers when they can’t even buy the cigarettes themselves. They’re not legal.”
– 17-year-old female

Smoke-Free Sporting Events

“I want to see the fields or people at fields, like team players and others, not to be smoking around the eyes of our young ones.”
– 27-year-old female

“In five years from now, I hope to see more designated smoking areas ... or even have it banned, especially at sport tournaments, at like kids’ tournaments.”
– 17-year-old female

FACT:

“Nunavut, which some have called Canada’s first post-treaty Aboriginal government, is a leader in tobacco control laws, policies and programs among Canada’s provinces and territories.

“For many years Nunavut had the highest rate of tobacco use of any province or territory and it still does. Yet, as clear evidence of the effectiveness of Nunavut’s tobacco control policies, since 2003, smoking prevalence has declined faster in Nunavut than any other province or territory, and three-quarters of Nunavut homes are now smoke-free.”⁶

All Halls in the Hazeltons and Gitx̱san are Become Smoke-Free

At the beginning of this project only one hall in the Hazeltons and Gitx̱san area was smoke-free for all events. Throughout the project, many people identified the wish that all halls would become smoke-free.

“If the hall went smoke-free I think it would be nice ‘cause when you’re playing floor hockey you can still smell cigarettes from the bingo the night before...”
–17-year-old female

“I think they should all go smoke-free... Every band, that’s what they should be doing. ... Get together with Hazelton and follow suit, and that’s only three other bands...”

– Elder

Healthier Social and Recreational Opportunities

Participants appreciated family-oriented activities organized in the communities and suggested increasing the frequency of community organized transportation between the communities. This would allow more opportunities for families to participate in recreation, traditional teachings, mom and tots groups, etc.

“I wish the halls would be used for other activities than bingo ‘cause it seems like bingo has priority.”

–21-year-old female

“I would like more activities like sports to happen in the village: soccer, basketball, softball, boxing, wrestling and more.”

– 28-year-old female

“And drop-ins would help where there’d be a lot of teachings on traditional values and the feast system and crafts and all that really good stuff that’s needed.”

– Health worker

Encourage Intergenerational Relationships

The need for better connections between children, youth and elders to foster learning about traditions and culture was repeated often in the study interviews. Language is a barrier some face when trying to understand the elders and their teachings because they do not speak Gitxsanimax.

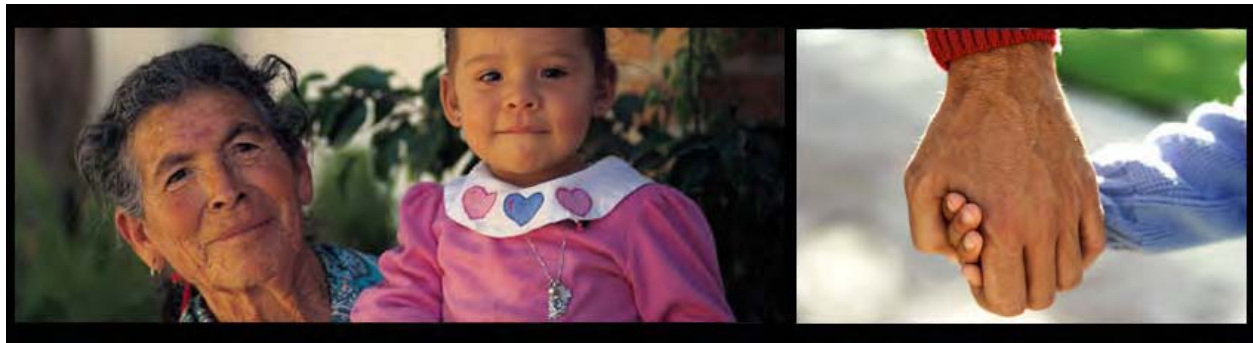


“Get more younger children in touch with the traditional ways with like elders and stuff so it’ll keep our culture going and then build respect and responsibility.”

– 25-year-old female

“I’d love to see [community] go in the direction of the Nisga’a where they have dancers meet weekly and involve youth and elders. We could get better connected, the elders and youth.”

– Community developer



The Influence of Children

To Quit or Reduce Smoking and Secondhand Smoke Exposure

Concern for the well-being of children was a recurring theme in our conversations with people. Children were often talked about as the motivation for reducing smoking and secondhand smoke exposure.



“That’s why I’m trying to quit smoking now is just because, you know, my children see what we do and then they want to do it, right?”

– 28 year-old female

“If I didn’t have them [children], I’d probably still be smoking.”

– 17 year-old female



“And the reason I quit was because my kids were coming home because they had learned stuff at school and they were concerned about me...”

–58-year-old female

To Encourage Change

Children also wanted changes in their families' smoking habits and at their schools. Youth have learned that smoking is unhealthy. They made it clear they wanted their families, friends and community to be vibrant and strong. Sometimes children learned about smoking from watching those around them.

"My daughter wrote a letter to the principal – she's 15-years-old – about the smoking around the school and wrote one of her reports on it."

–Community developer

"I just smoke just because it's there sometimes... Sometimes, I'll just sit there and watch. Yeah, I might as well have a smoke (laughs). But my son lectures me on cigarettes now."

– 32-year-old female

"I know my daughter came home from Grade 3 – she's nearly fifteen now – and the health nurse had been in and they had the talk about tobacco for like the whole week and she made a big poster. She didn't say anything to us, but the poster said 'We want to live a long life. We want don't want to be killed by smoking.' And it had a picture of the family, and she posted it on the door as you come in the house."

– Educator



"A leader takes people where they want to go. A great leader takes people where they don't necessarily want to go, but ought to be."

-Rosalyn Carter

The Impact of Elders

Leading Change or Maintaining Norms

Our interviews suggest that elders are very influential in establishing norms in their families and communities. When elders smoked indoors, younger members of the family sometimes felt uncomfortable asking them to smoke outside. When elders did not smoke, most people respected this and smoked away from them. Some elders offered a smoke-free place for their children and grandchildren.

The Influence of Elders Re-Affirmed

Many people spoke about the role of elders and hereditary chiefs in establishing norms for non-smoking feasts. Some of the elders we spoke with believed that they were not listened to nor respected; however, many of the other people we spoke with, including women and youth, wanted elders to take a stand on the issue of smoking and believed that only then would change happen.

"I think once our elders step in and show what needs to be done and stuff – like, even though our elders don't smoke, ... if they were to enforce no smoking here, like even right out of the halls, things would change."

–28-year-old female

Women Working with Their Communities

Women wanted to be involved in their communities. Many were actively involved in creating youth groups and looking after children. They wanted to connect with elders. Accessing community space for meetings and other activities, however, was challenging because the halls were often booked for bingo.

“[At] our last luncheon we were all thinking about starting up a youth program again. We've got two pool tables, foos[ball] table, soccer table, board games, and we're trying to ask the band office to find a location where we can set all this up for the kids.”

– 35-year-old female

“We meet with this group of kids once a week and we just talk like, what they want to do and what we can do to keep them busy, and it's on a volunteer basis right now so it's just a once a week thing. But you know, I get a lot of info out of them. It started off with just five showing up, and now it's up to 15 ... just like that.”

– 28-year-old female

Individuals and Communities Making Change

The Role of Chiefs and Council

The role of both hereditary chiefs and elected band councils was very important to the participants in leading communities towards smoke-free spaces and tobacco reduction and cessation efforts. Some band councils took the lead in creating bylaws; others responded after repeatedly hearing from many individuals about their desire for more smoke-free spaces in the community.

Halls That Have Gone Smoke-Free

Community halls have been smoke-free for feasts for almost 20 years in the Hazeltons. One community hall was smoke-free for **all** events before this project began. During the project, two other halls became smoke-free. In the fall of 2008, in response to concerns raised by community members and local tobacco control advocates, the remaining halls in the Hazeltons became smoke-free for all events.

"I know there's no smoking at the hall. I think that's heaven."
– Health worker

“*"I was kinda happy when I heard they don't allow smoking at all in their hall."*

– 24-year-old female

"I think the smoking ban sorta helps because when I went to the non-smoking bingo a couple of times, I didn't really care too much if I light up a smoke or not."

– 32-year-old female

Individual Efforts

Individuals have worked continuously to bring about positive change for their families, friends and community. People made choices in their own lives, on behalf of their children and grandchildren, and on behalf of their community to create smoke-free spaces in their homes, vehicles, and community halls. Often it was one person's efforts, combined with the support of another person, which generated even more community support to initiate change.

In the fall of 2008, a group of concerned parents, elders, and community members in Gitsegukla took action to regain the use of their community hall for recreational activities for their children and to protect them from the secondhand smoke from bingo. They began going door-to-door with a petition and reached out to the media with their concerns. Together the group entered the community hall during a bingo to voice their concerns.

Various people spoke out about the importance of the children's health, wellness and safety. They explained that they were worried about the health of their children who used the same hall as a school gymnasium. Within days, regulations were changed to make the hall smoke-free for all events. This action made it easier for others to also introduce this change. In the months that followed, all the halls in the area became smoke-free.

“I see the young parents standing outside. Even though it's real freezing cold they smoke outside. It's out of respect for the kids.”

– 47-year-old male

“I'm glad there is non-smoking now in some of our halls because it's much cleaner and you can enjoy being there... I know some people are avoiding using halls that are non-smoking for dances, but I applaud those decisions that were made because I've gone to a wedding where there's non-smoking. Even though there was booze, there was non-smoking and I was able to stay and watch the grand march and enjoy it without having to leave.”

– Health worker



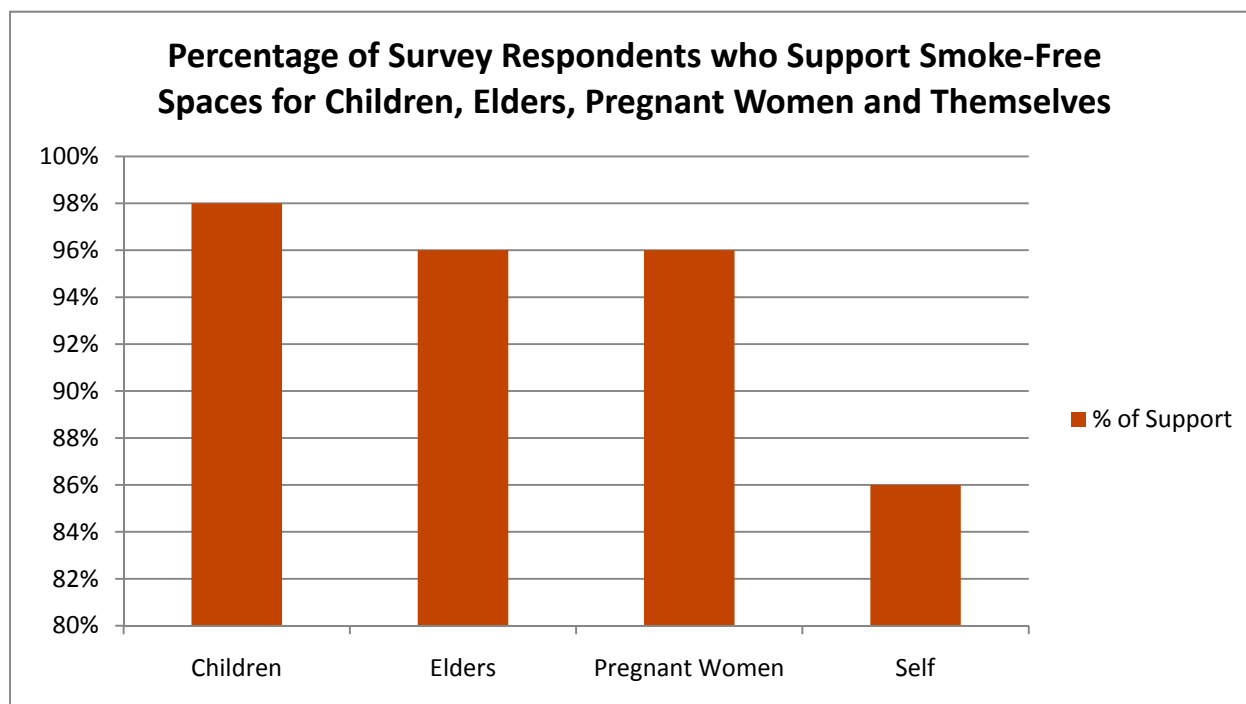
Next Steps

The successful efforts of women, leaders, youth and other community members in establishing smoke-free environments in the Hazeltons and Gitx̱san area provide important models for extending these efforts to make the Hazeltons and Gitx̱san area entirely smoke-free. These communities have well established means of community organization as evidenced by the Tobacco Coalition and the ability of the community to mobilize around a protest in one community that led to a smoking ban in a community hall.

Tobacco Coalition

The Tobacco Coalition is a group of committed residents in the Hazeltons who are interested in providing information about secondhand smoke and smoking cessation and in building community support for more smoke-free spaces. The activities associated with this research project were a catalyst for renewed interest among those involved in the Tobacco Coalition to continue their work. This small group wants to make connections with all the communities in the Hazeltons and the Gitx̱san area to reduce cigarette smoking.

This chart, based on data collected in 2006 and 2008, shows that the majority of people felt that it was important to provide smoke-free environments for children, pregnant women, the elderly and themselves.



What else can be done?

Who should be involved in reducing tobacco use in your community?

Levels of Leadership Working Together

For effective community relevant tobacco reduction and cessation programs, it is necessary to recognize the various players that need to be actively engaged in the issue. These include individual community members, community leaders of all kinds, including band councils and hereditary leaders, as well as provincial tobacco control officers and provincial and federal bodies in charge of policy development and funding strategies.

What Local Leadership Can Do

Local leaders can promote smoke-free band workplaces and ensure tobacco cessation programs are available for all band employees. Leaders and health workers can role model smoke-free health behaviors.

Local leaders can listen to their communities and work to create smoke-free spaces for the health of all community members.

Local leaders can work with provincial and federal counterparts and explore creative and appropriate ways to promote tobacco reduction and alternate revenue strategies.

What Individuals Can Do

Individuals can get involved in their local communities and learn about the health effects of smoking and secondhand smoke. They can collaborate with tobacco control officers and with their local health care providers to lobby for smoking cessation programs for themselves and for their community.

Individuals can make their opinions known to their local leaders regarding their desire for smoke-free community events and spaces.

Individuals can support other community members and leaders who are trying to create smoke-free spaces in their communities, homes and vehicles.

Discussion Questions

The following discussion questions can be used to continue the dialogue about secondhand smoke exposure among community members in the Hazelton and Gitxan area. The best solutions are those developed through dialogue among community members and leaders. The following are questions to help foster this discussion.

- 1) **What have you observed about smoking and secondhand smoke:**
 - a) at public gatherings?
 - b) at bingos?
 - c) at sports events?
 - d) outside schools?
 - e) inside vehicles?
 - f) in homes?
- 2) **Where is secondhand smoke exposure a problem in this community?**
- 3) **Who are the key people that need to be involved to address this issue?**
 - a) What do they need to know?
 - b) Who can provide them with this information?
- 4) **Who benefits from continued smoking in community halls and at other events?**
- 5) **What are the emotions involved in this issue?**
- 6) **What can be done to help women who want to make their homes smoke-free?**
- 7) **What are other sources of revenue that would help reduce dependence on revenues from cigarette sales and community events that include smoking? How would a surcharge on cigarette sales help?**
- 8) **What are some ways to improve the situation? What else needs to happen in the community to reduce reliance on smoking?**
- 9) **What other questions should be discussed?**

Information About Research

Research Ethics

All health research is compelled to be conducted following ethical guidelines. The Canadian Institutes of Health Research recently created specific guidelines for health research involving Aboriginal communities. The guidelines can be found on the CIHR website at <http://www.cihr-irsc.gc.ca/e/29134.html>

Some Aboriginal communities have their own research ethics boards which review potential research projects planned for the community. Other communities have drafted their own community protocols regarding health research.

One of the key points in ethics is the sharing of research findings and inviting the community to comment on the findings. This project has used newsletters, theatre presentations and community meetings to share findings and create opportunities for discussion and insight about interpretations.

Research Funding

Regional, provincial, federal authorities and non-government organizations provide funding for community health research. Funding amounts can vary from a few hundred dollars to several million dollars.

Research Terms

Methods - refers to how the research is done. Different research methods are used to answer different types of questions.

Quantitative research methods often involve surveys with structured questions. Answers are scored and tabulated. In this study, numerical data was used to describe how many people smoke or how many people support a smoking ban at the community hall.

Qualitative research methods are used to understand social issues and behaviours and involve the use of interviews and observations. In this study, interviews were used to learn about why people smoke indoors or what the best ways to support smoking reductions are.

References

¹http://www.tobaccofacts.org/tob_truth/soaddictive.html

² <http://www.tobaccofacts.org/secondhand/index.html>

³<http://www.hc-sc.gc.ca/hl-vs/pubs/tobac-tabac/second-guide/effects-effets-eng.php>

⁴<http://www.hc-sc.gc.ca/hl-vs/pubs/tobac-tabac/second-guide/truth-verite-eng.php>

⁵<http://www.who.int/features/qa/60/en/index.html>

⁶<http://www.nationtalk.ca/modules/news/article.php?storyid=14876>

BC Stats. (2007) Summary of Smoking Rates for BC Sept 2006-August 2007.
<http://www.bcstats.gov.bc.ca/data/ssa/reports/tobacco/smoke07060707.pdf> (pg 19)

Khan, N.A. & Wardman, A.E.D. (2004) Smoking attributable mortality among British Columbia's First Nations populations. *International Journal of Circumpolar Health*. 63(1), 81-92.

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Project Outcomes

Conference and Community Presentations

Hutchinson, P., Bottorff, J.L, Mowatt, R, Wardman, D., Chambers, N. *Counter Revolutionaries: The Development and Implementation of Smoke-free Space in First Nation Communities*. Poster presented at the Inaugural First Nations, Inuit and Métis Research Meeting. Montreal, April, 2008.

Carey, J., Mowatt R., Bottorff, J. L., Johnson, J. L., Varcoe C., Hutchinson, P., Sullivan D., Williams, W. *Complex Contexts: Understanding Aboriginal Women's experiences of bingo, safety and second-hand smoke exposure in rural reserve communities*. Paper presented at the BC Rural and Remote Health Research Conference, Prince George, BC, May 13-14, 2008.

Bottorff, J.L., Carey, J., Mowatt, R., Johnson, J., Varcoe, C., Wardman, D. Sullivan, D., Williams, W., Hutchinson, P. *Tobacco reduction initiatives for young pregnant and parenting Aboriginal Women and their Children*. Community Meeting in Gitanmaax, BC, May 28-30, 2008.

Mowatt, R., Sullivan D., Bottorff, J.L., Carey, J., Hutchinson, P., Williams, W., Wardman, D., Varcoe, V., Johnson, J. *Tobacco Reduction initiatives for Young Aboriginal Mothers and Families (Gitxsan T.R.Y.A.M.F)*. Paper presented at the 3rd Annual Aboriginal Health Conference, Prince Rupert, BC. June 24-25, 2008.

Articles

Bottorff, J.L., Carey, J., Mowatt, R., Varcoe, C., Johnson, J.L., Hutchinson, P., Sullivan D., Williams, W., & Wardman, D. (2009). Bingo halls and smoking: Perspectives of Aboriginal women. *Health and Place*, 15, 1014-1021.

Bottorff, J.L., Johnson, J., Carey, J., Hutchinson, P., Sullivan D., Williams, W., Wardman, D., & Mowatt, R. (In press). A family affair: Aboriginal women's efforts to limit second-hand smoke exposure at home. *Canadian Journal of Public Health*.

Varcoe, C., Bottorff, J.L., Carey, J., Mowatt, R., Sullivan, D., & Williams, W. (In press). Wisdom and influence of elders: Possibilities for health promotion and decreasing tobacco exposure in First Nations communities. *Canadian Journal of Public Health*.

Hutchinson, P., Bottorff, J.L, Chambers, N., Mowatt, R., & Wardman, D. (In review). What are the odds? Establishing smoke-free bingo halls in First Nation communities.

Community Materials:

- Gitxsan TRYAMF Project (2009). Let's Talk About Second-Hand Smoke.
- Gitxsan TRYAMF Newsletters: November 2006, August 2007, February 2008, March 2008, May 2008, August 2008.

